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Sent By: MAUREEN STRETCH;		508 651 9932 ;		Oct 25 04 4:55PM;		Page 1	
MAUREEN STRETCH ATTORNEY AT LAW 20 Charles Street Nauck, MA 01760 508-653-8143 • Fax: 508-651-9932 e-mail: mstretch@spatrad.com							
FAX COVER SHEET							
To: Director of Patents and Trademarks, Mail Stop ISSUE FEE Of: Commissioner for Patents, P.O. Box 1450 Alexandria VA 22313-1450 FAX NUMBER TRANSMITTED TO: 703-746-4000 From: Maureen Stretch, Client/Master: BT00-005CIP Issue Fee Transmittal App Ser. No. 09/702,030 Date: October 25, 2004							
DOCUMENTS:				NUMBER OF PAGES (not counting this cover sheet)			
1.	Part B Fee(s) Transmittal Issue Fee for App 09/702,030			2			
2.							
3.							
4.							
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Commissioner for Patents
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Alexandria, Virginia 22313-1450
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07/24/2004

Maureen Stretch
26 Charles Street
Natick, MA 01760

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MAUREEN STRETCH (Depositor's name)
Maureen Stretch, Reg. #29,447 (Signature)
10/25/04 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/702,050	10/30/2000	JEFFREY CONKLIN	ET00-005CIP	8548

TITLE OF INVENTION: SYSTEM AND METHOD FOR CONTRACT AUTHORITY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	10/25/2004
EXAMINER	ART UNIT	CLASS-SUBCLASS			
MEINKECKE DIAZ, SUSANNA M	3623	705-080000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Sky Technologies, LLC

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

BOSTON, MA

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

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☐ Publication Fee (No small entity discount permitted)
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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 621656 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
☐ b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).

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(Authorized Signature)

(Date)

Maureen Stretch Reg. #29,447 10/25/04

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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1. MAUREEN STRETCH

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(Date)

Maureen Stretch Reg. #29,447 10/25/04

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